

FOR INSTRUCTIONS, SEE BACK OF FORM

**DISCLOSURE SUMMARY PAGE**

Reset Form

<b>FORM</b> <b>DR-2</b> (Rev. 07/2003)	<b>DISCLOSURE</b> <b>REPORT</b>
<b>For Office Use Only</b>	
Comm #	9674
Logged In	SW
Scanned	SW
Computer	SW
Audited	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
AMERICA FIRST PARTY IOWA

**IMPORTANT:** Indicate type of committee you are reporting for: ☐ 1 ☒ 2

( 1 ) Statewide/Legislative Candidate ( 2 ) Statewide PAC ( 3 ) State Party ( 4 ) County/Local Candidate  
( 5 ) County PAC ( 6 ) Ballot Issue/Franchise Committee ( 7 ) County/City Central Committee  
( 8 ) Support Slate of Candidates

**CANDIDATE COMMITTEES ONLY:**

Candidate Name \_\_\_\_\_ Political Party \_\_\_\_\_  
Office Sought \_\_\_\_\_ District (if Senate or House) \_\_\_\_\_

JAN 13 2004

Jax

SIGNATURE OF TREASURER (or person filing this report)

TELEPHONE

DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

**SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:**

I AM FILING A 01/20/04 REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR  
(report date)

Indicate one ☒ 1 ☐ 2☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3  
(You must continue to file reports until a Notice of Dissolution is filed )

Local Committees, enter Date of Election

County &amp; Local Committees, enter County in which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

36.70

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

4.30

Schedule F Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL .....\$ 41.00

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

41.00

Schedule F Loan Repayments total (Attach Schedule F)

**CASH ON HAND** at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

0.00

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐

YES

☐

NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

AMERICA FIRST PARTY IOWA

SCHEDULE

**A**

(Rev. 07/03)

MONETARY  
RECEIPTS☐ CHECK THIS BOX IF  
AMENDING FORM

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B 32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/20/03	ID# CK#	MELANIE K. WOOTEN 2202 - 8TH AVE. E. #1 UNIVERSITY PARK, IA 52595		\$4.30	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 4.30

TOTAL (if last page of this schedule)

\$ 4.30

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule A)

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

AMERICA FIRST PARTY IOWA

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/18/03	ID# CK#	HOWARD J. & BERNICE BEATTY P O BOX 196 ATKINS, IOWA 52206	REIMBURSEMENT OF CASH CONTRIBUTION, TO CLOSE OUT AFPIA ACCOUNT	\$ 20.00
10/18/03	ID# CK#	DANIEL J. KELLER 16201 - 6201H AVENUE ROLAND, IA 50236	REIMBURSEMENT OF CASH CONTRIBUTION, TO CLOSE OUT AFPIA ACCOUNT	15.00
10/18/03	ID# CK#	COMMERCIAL FEDERAL BANK P O BOX 1103 OMAHA, NE 68101	COST OF OBTAINING TWO (2) CASHIER'S CHECKS AS SET OUT ABOVE @ \$3.00 EACH	6.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 41.00
TOTAL (if last page of this schedule)				\$ 41.00

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A 402(3)(i).)

**Notice of Dissolution**

Reset Form

FORM	(Rev. 07/03)
<b>DR-3</b> <b>NOTICE OF</b> <b>DISSOLUTION</b>	
<b>For Office Use Only</b>	
Comm. #	9674
Indexed	
Filed	
Computer	
Certified Date of Dissolution	

JAN 13 2004  
Jax

**COMMITTEE NAME**

AMERICA FIRST PARTY IOWA	
Official Name of Committee	
P. O. Box 108, 2202 - 8th Ave. E.	
Street	
University Park, IA 52595	
City, State, Zip Code	
(641)	673-4584
Area Code	Telephone

**WHEN TO FILE:**

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred;
2. All campaign funds have been spent;
3. All campaign property sold or transferred (candidates only); and
4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

Antoine K. Wooten  
Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

1-13-04  
Date Signed

**FOR INSTRUCTIONS, SEE BACK OF FORM**

This form is not applicable to statutory political committees.